24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 61 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Speak Out PAC	C C00530766
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report file	
Full Name of Payee Caleb Craig	Date of Public Distribution/Dissemination
	07 09 7 2014
Mailing Address 1410 Bushville drive	Amount
City State Zip Code	60.00
Lenoir NC 28645	Transaction ID: 8c84bdc5-fb17-436f-b Date of Disbursement or Obligation
Purpose of Expenditure Salary Category/ Type 001	07 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	fice Sought: House District: 00
Ms. Kay Hagan Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Diagram 152428.43	sbursement For: Primary ⊠ General 14 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Caleb Craig	07 09 7 2014
Mailing Address 1410 Bushville drive	Amount
City State Zip Code	9.00
Lenoir NC 28645	Transaction ID : 339f7dca-ad1c-4d0d-a Date of Disbursement or Obligation
Purpose of Expenditure Mileage Category/ Type 002	07
Name of Federal Candidate Support Of	ffice Sought: House District: 00
Ms. Kay Hagan Oppose	President Senate State: NC
	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	69.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	•
Ms. Emily Buchanan [Electronically Filed] Date	07 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	